



## SEMI-ANNUAL LOBBYING EXPENDITURE REPORT FOR EMPLOYERS OF LOBBYISTS

**INSTRUCTIONS:** This Semi-Annual Lobbying Expenditure Report is for reporting all expenditures relating to lobbying in the State of Tennessee. Pursuant to T.C.A. § 3-6-303(a), this Report is due within forty-five (45) days after the conclusion of the six-month periods ending March 31 and September 30. The Report must be filed with the Tennessee Ethics Commission, 201 4th Avenue North, Suite 1820, Nashville, TN 37243. If you have questions, please feel free to contact the Commission at (615) 253-8634 or e-mail us at [ethics.counsel@state.tn.us](mailto:ethics.counsel@state.tn.us). You must complete every item. Attach additional pages as necessary. Please note that the information listed on this Report will be posted on the Commission's website as required by T.C.A. § 3-6-303(3)(b).

- 1 a. **DATE OF DISCLOSURE** May 9, 2007
- b. **REPORTING PERIOD [check box]:** ☒ **October 1 – March 31** ☐ **April 1 – September 30**
- 2 a. **NAME OF CORPORATION/ENTITY** Bank of America Corporation/Bank of America, NA
- b. **NAME OF CEO, CFO, or TITLE AND NAME of PERSON RESPONSIBLE FOR SUPERVISING LOBBYISTS**

Wendy Y. Jamison, Vice President Public Policy

- 3 a. **ADDRESS** **Street or Rural Route** **City** **State** **Zip Code**
- 1100 North King Street, DE5-001-02-07 Wilmington Delaware 19884

- b. **PHONE NUMBER** (302) 432-0956

4. **LOBBYING INTERESTS**

- a. List the general subject area(s) lobbied, e.g., "healthcare," "insurance," etc.

Matters pertaining to financial institutions

- b. Describe the general nature and interest of the entity employing or retaining lobbying services, e.g., "insurance company," "professional association," etc.

Financial institution

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**8. AGGREGATE TOTAL OF ALL IN-STATE EVENTS**

State the aggregate total amount of all employer expenditures for all in-State event(s) which was or should have been reported to the Commission pursuant to T.C.A. § 3-6-305(b)(8). **Authority: T.C.A. § 3-6-303(a)(3).**

N/A

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**9. TO BE SIGNED BY REPORTING OFFICIAL (must be attested to by a witness)**

I certify that the information contained in this Report is true and that it is a complete and accurate report to the best of my knowledge, information and belief.

Cy Naumoff, Esq. 5/9/07  
 Signature of Person Completing Report Date  
 Print Name of Person: Cy Naumoff, Esq.

I, the undersigned, acknowledge that I have reviewed the foregoing Report and certify that is complete and accurate to the best of my knowledge, information and belief.

Wendy Y. Jamison 5/10/07  
 Signature of CEO, CFO or Authorized Representative Date  
 Print Name of Person: Wendy Y. Jamison

Kim Isbert, the undersigned, do hereby witness the above signature of the CEO,  
 (Printed Name of Witness) CFO or Authorized Representative, which was signed in my presence.

Kim Isbert 5/10/07  
 Signature of Witness Date

